



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David A. Edgerton

Date: March 22, 1993

Serial No. 07/859,935

Group Art Unit 2107

Filed: March 30, 1992

Exr: T. Eley

For: METHOD AND APPARATUS FOR PLACING BRAILLE
LETTERS ON ARCHITECTURAL SIGNSHon. Commissioner of Patents and Trademarks
U.S. Patent and Trademark Office
Washington, D. C. 20231RECEIVED
MAR 31 1993
GROUP 3200AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is

☒ a small entity - verified statement:☐ attached
☒ already filed.☐ other than a small entity.EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

- (a)
- ☐
- Applicant petitions for an extension of time under 37 CFR 1.17(a)-(d) for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$ 110.00	\$ 55.00
<input type="checkbox"/>	two months	\$ 360.00	\$180.00
<input type="checkbox"/>	three months	\$ 840.00	\$420.00
<input type="checkbox"/>	four months	\$1,320.00	\$660.00

FEE:

If an additional extension of time is required please consider this a petition therefor.

- (b)
- ☐
- Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, on 3/23/93John McPhail

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

COL. 1			COL. 2		COL. 3	SMALL ENTITY		OTHER THAN A SMALL ENTITY		
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra		Rate	Addit Fee	Rate	Addit Fee	
Total	*3	Minus	**20	0	x	\$ 11	\$0.0	\$ 22	\$	
Independent	*1	Minus	***3	0	x	\$ 37	\$0.0	\$ 74	\$	
<input type="checkbox"/> First presentation of Multiple Dep. Claim					x	\$115	\$0.0	\$230	\$	
						TOTAL	\$	OR	TOTAL	\$

* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

☒ No additional fee for claims is required.

OR

☐ Total additional fee for claims required \$_____.

FEE PAYMENT

5. ☐ Charge Account No. 08-1650 the sum of \$00.00. A duplicate of this transmittal is attached.

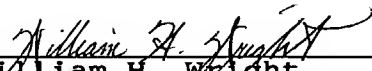
☐ A check in the amount of \$_____ is enclosed.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 08-1650.

AND/OR

☒ If any additional fee for claims is required, charge Account No. 08-1650.


 William H. Wright
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March 22, 1993
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